Image# 13962855852 PAGE 1 / 31

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

r orim ox	or Other Than	An Authorized	a Committe	e		Office Use Only
NAME OF TOO COMMITTEE (in full)	TYPE OR PRINT		ample: If typir or the lines.	ig, type	12FE4M5	
American Academy of F	Family Physic	cians Political	Action Co	ommittee		
ADDRESS (number and street)	1133 Connecticu	t Avenue, NW				
Check if different	Suite 1100					
than previously reported. (ACC)	Washington				DC	20036
2. FEC IDENTIFICATION NUI	MBER ▼	CITY		5	STATE A	ZIP CODE ▲
C C00411553		3. IS THIS REPORT		IEW N) OR	X AN (A)	IENDED
4. TYPE OF REPORT (Choose One)	(b) Monthly Report Due On:	Feb 20 (M2)	×	May 20 (M5)	Aug	20 (M8) Nov 20 (M11) (Non-Election Year Only)
(a) Quarterly Reports:		Mar 20 (M3)		lun 20 (M6)	-	20 (M9) Dec 20 (M12) (Non-Election Year Only)
April 15 Quarterly Report (Q1)	Apr 20 (M4)		lul 20 (M7)	. —	20 (M10) Jan 31 (YE)
July 15 Quarterly Report (Q2	(c) 12-Day PRE-E	lection	Primary (12P Convention (General Special (
October 15 Quarterly Report (Q3				. 20)		
January 31 Year-End Report (YE	Ξ)	Election on	M M /	D D /	Y	in the State of
July 31 Mid-Year Report (Non-election Year Only) (MY)	POST-	Election	General (300	i)	Runoff (3	Special (30S)
Termination Report (TER)	Нероп	for the: Election on	M M /	D = D /	Y = Y = Y = Y	in the State of
5. Covering Period 04	/ D D / Q1	2013	through	M M M 04	/ 30 /	2013
I certify that I have examined this Type or Print Name of Treasurer	Randell K. Wexle		wledge and b	pelief it is trud	e, correct and	d complete.
	ll K. Wexler, MD		[Electronically	Filed] D	ate 06	/ D D / Y Y Y Y Y Y 13 2013
NOTE: Submission of false, erroned	ous, or incomplete	information may su	ubject the pers	son signing th	is Report to th	ne penalties of 2 U.S.C. §437g.
Office Use Only						FEC FORM 3X Rev. 12/2004

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003) Page 2

Write or Type Committee Name

American Academy of Family Physicians Political Action Committee

2013 04 30 Report Covering the Period: 2013 From: To: **COLUMN A COLUMN B** This Period Calendar Year-to-Date (a) Cash on Hand 402087.22 January 1, 2013 (b) Cash on Hand at 353768.63 Beginning of Reporting Period..... 136186.79 29522.94 (c) Total Receipts (from Line 19) (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 383291.57 538274.01 6(a) and 6(c) for Column B)..... 45413.45 200395.89 Total Disbursements (from Line 31)...... Cash on Hand at Close of 8. Reporting Period 337878.12 337878.12 (subtract Line 7 from Line 6(d))..... Debts and Obligations Owed TO the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) 10. Debts and Obligations Owed BY the Committee (Itemize all on 0.00 Schedule C and/or Schedule D)

×

This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission 999 E Street, NW Washington, DC 20463

Toll Free 800-424-9530 Local 202-694-1100

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

American Academy of Family Physicians Political Action Committee

I. Receipts	I. Receipts COLUMN A CO Total This Period Calenda						
Contributions (other than loans) From:							
(a) Individuals/Persons Other							
Than Political Committees							
(i) Itemized (use Schedule A)	24302.12	95786.03					
(ii) Unitemized	5220.82	36565.10					
(iii) TOTAL (add Lines 11(a)(i) and (ii)▶	, 29522.94	132351.13					
(b) Political Party Committees	0.00	0.00					
(c) Other Political Committees							
(such as PACs)	0.00	0.00					
(d) Total Contributions (add Lines							
11(a)(iii), (b), and (c)) (Carry							
Totals to Line 33, page 5)▶	29522.94	132351.13					
. Transfers From Affiliated/Other							
Party Committees	0.00	0.00					
. All Loans Received	0.00	0.00					
_		7					
. Loan Repayments Received	0.00	0.00					
. Offsets To Operating Expenditures	7	0.00					
(Refunds, Rebates, etc.)							
·	0.00	1335.66					
(Carry Totals to Line 37, page 5)	0.00	1000.00					
to Federal Candidates and Other	0.00	2500.00					
Political Committees	0.00	2500.00					
Other Federal Receipts		0.00					
(Dividends, Interest, etc.)	0.00	0.00					
. Transfers from Non-Federal and Levin Funds							
(a) Non-Federal Account	2.00						
(from Schedule H3)	0.00	0.00					
	2.22						
(b) Levin Funds (from Schedule H5)	0.00	0.00					
(1) Table Toronton (1) 11 (2) (1)	200						
(c) Total Transfers (add 18(a) and 18(b))	0.00	0.00					
. Total Receipts (add Lines 11(d),							
12, 13, 14, 15, 16, 17, and 18(c))▶	29522.94	136186.79					
. Total Federal Receipts							
(subtract Line 18(c) from Line 19)▶	29522.94	136186.79					

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date		
. Operating Expenditures: - (a) Allocated Federal/Non-Federal		Jaionaa Tour to Date		
Activity (from Schedule H4)				
(i) Federal Share	0.00	0.00		
(ii) Non-Federal Share	0.00	0.00		
(b) Other Federal Operating				
Expenditures	413.45	1677.56		
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))▶	413.45	1677.56		
Transfers to Affiliated/Other Party	7			
Committees	0.00	0.00		
Contributions to Federal Candidates/Committees and Other Political Committees	45000.00	198000.00		
Independent Expenditures				
(use Schedule E)	0.00	0.00		
(2 U.S.C. §441a(d)) (use Schedule F)	0.00	0.00		
Loan Repayments Made	0.00	0.00		
Loans MadeRefunds of Contributions To:	0.00	0.00		
(a) Individuals/Persons Other Than Political Committees	0.00	718.33		
(I) Palitical Parts Conscillator	0.00	0.00		
(b) Political Party Committees(c) Other Political Committees	0.00	0.00		
(such as PACs)	0.00	0.00		
(d) Total Contribution Refunds				
(add Lines 28(a), (b), and (c))▶	0.00	718.33		
. Other Disbursements	0.00	0.00		
Federal Election Activity (2 U.S.C. §431(20))				
(a) Allocated Federal Election Activity				
(from Schedule H6)	2.00	0.00		
(i) Federal Share	0.00	0.00		
(ii) "Levin" Share	0.00	0.00		
(b) Federal Election Activity Paid Entirely				
With Federal Funds	0.00	0.00		
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))▶	0.00	0.00		
Total Disbursements (add Lines 21(c), 22,				
23, 24, 25, 26, 27, 28(d), 29 and 30(c))	45413.45	200395.89		
Total Federal Disbursements				
(subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)	45413.45	200395.89		

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures						
3. Total Contributions (other than loans) (from Line 11(d), page 3)	29522.94	132351.13				
4. Total Contribution Refunds (from Line 28(d))	0.00	718.33				
5. Net Contributions (other than loans) (subtract Line 34 from Line 33)	29522.94	131632.80				
i. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	413.45	1677.56				
. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	1335.66				
8. Net Operating Expenditures (subtract Line 37 from Line 36)	413.45	341.90				

1mage# 13962855857 PAGE 6 / 31

: 97 'A = G7 9 @ G B9 CI G'H9 LH F 9 @ 5 H9 8 'HC '5 'F 9 DC F HZ G7 < 98 I @ 'C F '+ H9 A = N5 H= C B

Form/Schedule: F3XA Transaction ID :

Amended to correct additional data entry mistakes - incorrect date on one donation to the PAC

Form/Schedule: Transaction ID:

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:					PAGE		7	OF		31	
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or for commercial purposes, other than using	the name and address of any political committee	
NAME OF COMMITTEE (In Full) American Academy of Family	Physicians Political Action Comm	ittee
Full Name (Last, First, Middle Initial) Pamela E Ahearn MD Mailing Address PO BOX 1798 PO Box 604 City Kingston FEC ID number of contributing federal political committee. Name of Employer Integris Family Medicine of Southern O Receipt For: Primary General Other (specify)	State Zip Code OK 73439-1798 C Occupation Family Physician Aggregate Year-to-Date ▼ 365.00	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) Kathleen Mary Ankers MD Mailing Address PO Box 295		Date of Receipt
City Andover FEC ID number of contributing federal political committee.	State Zip Code MA 01810-0005	04 03 2013 Transaction ID : C2296407 Amount of Each Receipt this Period 500.00
Name of Employer US Air Force - Veterans Health Affairs Receipt For: Primary General Other (specify) ▼	Occupation Physician Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) John L Bender MD Mailing Address 4674 Snow Mesa Dr Ste 1 City Fort Collins FEC ID number of contributing federal political committee. Name of Employer Miramont Family Medicine Receipt For:	State Zip Code CO 80528-8614 C Occupation Physician	Date of Receipt 04 29 2013 Transaction ID : C2317844 Amount of Each Receipt this Period
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	
SUBTOTAL of Receipts This Page (optional)		1865.00
TOTAL This Period (last page this line numb	per only)	

Use separate schedule(s) for each category of the Detailed Summary Page

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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

or for commercial purposes, other than using t	he name and address of any political committee to	solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Academy of Family	Physicians Political Action Committ	ee
Full Name (Last, First, Middle Initial) Reid B Blackwelder MD Mailing Address 4407 Leedy Rd 201 Cassel Dr City Kingsport FEC ID number of contributing federal political committee. Name of Employer Quillen College of Medicine Receipt For: Primary General Other (specify) Full Name (Last, First, Middle Initial)	State Zip Code TN 37664-2117 C Occupation Professor, Family Medicine Aggregate Year-to-Date ▼ 400.00	Date of Receipt M
Full Name (Last, First, Middle Initial) 3. Joseph T Burns MD Mailing Address 431 Harwood Dr S		Date of Receipt O4 03 2013
City	State Zip Code	Transaction ID: C2296406
Fargo	ND 58103-6132	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	200.00
Name of Employer	Occupation	
Essentia Health	Physician	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	
Full Name (Last, First, Middle Initial) C. Mary F Campagnolo MD		Date of Receipt
Mailing Address 1561 Route 38 Ste 6		04 23 2013
City	State Zip Code	Transaction ID : C2316570
Lumberton	NJ 08048-2939	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	100.00
Name of Employer	Occupation	
Virtua Medical Group, Marlton NJ	Physician	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	400.00	
SUBTOTAL of Receipts This Page (optional)		400.00
TOTAL This Period (last page this line number	er only)	

Use separate schedule(s) for each category of the Detailed Summary Page

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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Academy of Family Physicians Political Action Committee Full Name (Last, First, Middle Initial) David Adam Carlyle MD Date of Receipt Mailing Address PO BOX 3014 2309 Buchanan Dr 04 2013 29 City State Zip Code Transaction ID: C2317835 50010-3014 Ames IΑ Amount of Each Receipt this Period FEC ID number of contributing 1250.00 federal political committee. Name of Employer Occupation Physician Family Medicine East Receipt For: Aggregate Year-to-Date ▼ Primary General 1250.00 Other (specify) Full Name (Last, First, Middle Initial) B. Yushu Jack Chou MD Date of Receipt Mailing Address 2691 E California Blvd 04 29 2013 City State Zip Code Transaction ID: C2321164 San Marino CA 91108-1404 Amount of Each Receipt this Period FEC ID number of contributing 2500.00 federal political committee. Name of Employer Occupation Southern California Permanente Medical Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 2500.00 Other (specify) Full Name (Last, First, Middle Initial) c. Steven Michael Connolly MD Date of Receipt Mailing Address 7410 Old Erie View Dr 2013 04 12 City State Zip Code Transaction ID: C2305536 NY Fayetteville 13066-9679 Amount of Each Receipt this Period FEC ID number of contributing 500.00 С federal political committee. Name of Employer Occupation

500.00

Physician

Aggregate Year-to-Date ▼

Family Care Medical Group

Other (specify)

General

Receipt For:

Primary

Use separate schedule(s) for each category of the Detailed Summary Page

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		statements may not be sold or used by any persole name and address of any political committee to	
NAME OF COM			
		hysicians Political Action Committe	tee
Full Name (Last, Steven A Cra	First, Middle Initial) wford MD		Date of Receipt
Mailing Address	900 NE 10th St		M = M / D = D / Y = Y = Y
	OU Physicians Family Medicin		04 03 2013
City Oklahoma City		State Zip Code OK 73104-5420	Transaction ID : C2297167
Oklahoma City			Amount of Each Receipt this Period
FEC ID number of federal political co	9	C	454.54
Name of Employe	er	Occupation	
University of Okla	homa	Physician Faculty	
Receipt For:		Aggregate Year-to-Date ▼	
Primary	General	00 0	
Other (spec	crify) 🔻	1363.62	
Robert A. Cu			Date of Receipt
Mailing Address	99 Woodland St		04 25 2013
City		State Zip Code	Transaction ID : C2317327
Hartford		CT 06105-1207	Amount of Each Receipt this Period
FEC ID number of federal political co	· ·	C	365.00
Name of Employe		Occupation	
	necticut Health Cente	Physician	
Receipt For:		Aggregate Year-to-Date ▼	
Primary Other (spec	General	365.00	
	.,	300.00	
. Alice Fairma			Date of Receipt
Mailing Address	1135 W 69Th St		04 08 2013
City		State Zip Code	Transaction ID : C2302306
Chicago		IL 60621-1147	Amount of Each Receipt this Period
FEC ID number of federal political co	9	C	250.00
Name of Employe		Occupation	
	eau of Health Hospital	Physician	
Receipt For:		Aggregate Year-to-Date ▼	
Primary Other (spec	General	250.00	
Other (spec	-πy) ▼	250.00	
SUBTOTAL of Rec	eipts This Page (optional)		1069.54
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions

or f	or commercial purposes, other than using the	name and address of any political committee to	solicit contributions from such committee.
\	NAME OF COMMITTEE (In Full) American Academy of Family Pl	nysicians Political Action Committe	ee
۹	Full Name (Last, First, Middle Initial) Jose M David MD Mailing Address 804 Huntington Ct		Date of Receipt
_	City Albany FEC ID number of contributing	State Zip Code NY 12203-6015	04 25 2013 Transaction ID : C2317655 Amount of Each Receipt this Period
f N	ederal political committee. Name of Employer St Peters Health Partners Medical Asso Receipt For: Primary General Other (specify)	Occupation Family Physician Aggregate Year-to-Date ▼	416.67
3 N - C - F f	Full Name (Last, First, Middle Initial) Syeachia Dennis MD Mailing Address 1334 N Lansing Ave Apt 301 City Tulsa FEC ID number of contributing ederal political committee. Name of Employer	State Zip Code OK 74106-5907 C Occupation	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
_	Morton Comprehensive Health Center Receipt For: Primary General Other (specify) ▼	Family Medicine Aggregate Year-to-Date ▼ 365.00	
C M - F	Full Name (Last, First, Middle Initial) Barbara J Doty MD Mailing Address 2250 S Woodworth Loop Ste 100 City Palmer FEC ID number of contributing ederal political committee.	State Zip Code AK 99645-7457	Date of Receipt M M / 29 2013 Transaction ID : C2317842 Amount of Each Receipt this Period 500.00
F	Name of Employer Providence Matanuska Health care Receipt For: Primary General Other (specify)	Occupation Physician Aggregate Year-to-Date ▼ 1000.00	
su	IBTOTAL of Receipts This Page (optional)	· · · · · · · · · · · · · · · · · · ·	1281.67
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NAME OF COMMITTEE (In Full)	r Physicians Political Action Committee	
Full Name (Last, First, Middle Initial) Wanda D Filer MD Mailing Address 510 Aqua Ct City	State Zip Code	Date of Receipt 04 02 2013 Transaction ID : C2296360
York FEC ID number of contributing federal political committee. Name of Employer	PA 17403-3623 C Occupation	Amount of Each Receipt this Period 350.00
Strategic Health Institute Receipt For: Primary General Other (specify)	Family Physician Aggregate Year-to-Date ▼ 1050.00	
Full Name (Last, First, Middle Initial) Conrad L Flick MD Mailing Address 103 Greenway Overlook		Date of Receipt 04 29 2013
City Cary FEC ID number of contributing federal political committee. Name of Employer	State Zip Code NC 27518-9053 C Occupation	Transaction ID : C2317847 Amount of Each Receipt this Period 1000.00
Family Medical Associates of Raleigh Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼	Physician Aggregate Year-to-Date ▼ 1000.00	
Full Name (Last, First, Middle Initial) James Spencer Gainey Mailing Address 338 Merrivale Ln		Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Spartanburg FEC ID number of contributing federal political committee. Name of Employer Spartanburg Regional Physician Group Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼	State Zip Code SC 29301-5363 C Occupation Physician Aggregate Year-to-Date ▼ 365.00	Transaction ID : C2320167 Amount of Each Receipt this Period 365.00
SUBTOTAL of Receipts This Page (optional)		1715.00
TOTAL This Period (last page this line numb	per only)	

Use separate schedule(s) for each category of the Detailed Summary Page

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\		
•	Physicians Political Action Commit	ttee
Full Name (Last, First, Middle Initial) Michael Edward Grady MD		Date of Receipt
Mailing Address 220 Tillicum Dr		04 29 2013
City	State Zip Code	Transaction ID : C2317830
Silverton	OR 97381-1886	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	370.00
Name of Employer	Occupation	_
Michael Grady	family physician	
Receipt For:	Aggregate Year-to-Date ▼	7
Primary General Other (specify) ▼	370.00	
Full Name (Last, First, Middle Initial) Lori J Heim MD		Date of Receipt
Mailing Address 250 Hollybrook Farm Ln		04 26 2013
City	State Zip Code	Transaction ID : C2317682
Vass	NC 28394-8952	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer	Occupation	1
Scotland Memorial Hospital	Physician	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial)		D. (D.)
. Daniel J Heinemann MD Mailing Address 1305 W 18th St		Date of Receipt 04 04 2013
City	State Zip Code	Transaction ID : C2297487
Sioux Falls	SD 57105-0401	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	100.00
Name of Employer	Occupation	+
Sioux Valley Health Systems	Physician	
Receipt For:	Aggregate Year-to-Date ▼	7
Primary General	450.00	
Other (specify) ▼		
Other (specify) ▼ SUBTOTAL of Receipts This Page (optional)		720.00

Use separate schedule(s) for each category of the Detailed Summary Page

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or for commercial purposes, other than using	the name and address of any political committee t	
American Academy of Family	Physicians Political Action Commit	ltee
Full Name (Last, First, Middle Initial) Susan Hogeland CAE Mailing Address Exec Vice Pres CA AFP 1520 Pacific Ave City San Francisco FEC ID number of contributing federal political committee. Name of Employer California Academy of Family Physician Receipt For: Primary General Other (specify)	State Zip Code CA 94109-2627 C Occupation Administrator Aggregate Year-to-Date ▼ 250.00	Date of Receipt O4 29 2013 Transaction ID: C2320345 Amount of Each Receipt this Period 250.00
Beulette Y Hooks MD Mailing Address 7286 E Wynfield Loop City	State Zip Code	Date of Receipt 04 29 2013 Transaction ID : C2317849
Midland FEC ID number of contributing federal political committee.	GA 31820-3925	Amount of Each Receipt this Period 365.00
Name of Employer DOD Receipt For: Primary General Other (specify) ▼	Occupation Physician Aggregate Year-to-Date ▼ 365.00	- -
Full Name (Last, First, Middle Initial) Richard R Horecka MD Mailing Address 1805 Wisconsin Ave City Benson FEC ID number of contributing federal political committee. Name of Employer Information Requested	State Zip Code MN 56215-1653 C Occupation Information Requested	Date of Receipt 04 29 2013 Transaction ID : C2317846 Amount of Each Receipt this Period 365.00
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 365.00	
SUBTOTAL of Receipts This Page (optional).		980.00
TOTAL This Period (last page this line numb	er only)	

SCHEDULE A (FEC Form 3X) ITE

FOR LINE NUMBER: PAGE 15 OF

MIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	`	ck only 11a 13	·—	1b	11c		12 16		17
information copied from such Reports and Statements ma	ay not be sold or used by any pe	rson fo	or the p	purpos	se of s	oliciting	cor	ntributi	ions	

Any or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Academy of Family Physicians Political Action Committee Full Name (Last, First, Middle Initial) Elvin C Irvin MD Date of Receipt Mailing Address 555 E Cheves St 04 08 2013 City State Zip Code Transaction ID : C2343281 SC 29506-2617 Florence Amount of Each Receipt this Period FEC ID number of contributing C 91.50 federal political committee. Name of Employer Occupation **Baptist Health Care** Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 268.00 Other (specify) Full Name (Last, First, Middle Initial) B. John R Jacobsen MD Date of Receipt Mailing Address 1323 H St Filmore County Medical Center 04 30 2013 City State Zip Code Transaction ID: C2322383 NE Geneva 68361-2124 Amount of Each Receipt this Period FEC ID number of contributing 365.00 federal political committee. Name of Employer Occupation Filmore County Medical Center Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 365.00 Other (specify) Full Name (Last, First, Middle Initial) c. Rebecca Jaffe Md Mph Jaffe MD Date of Receipt Mailing Address 3105 Limestone Rd 2013 04 29 Ste 300 City State Zip Code Transaction ID: C2317845 DE Wilmington 19808-2156 Amount of Each Receipt this Period FEC ID number of contributing C 1000.00 federal political committee. Name of Employer Occupation Physician Rebecca Jaffe and Asso, PA Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) 1456.50 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions

Full Name (Last, First, Middle Initial) Carla Lee Kakutani MD Mailing Address 438 Abbey St		Date of Receipt
City	State Zip Code	04 08 2013
Winters	CA 95694-1837	Transaction ID : C2300137 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	2500.00
Name of Employer	Occupation	
Sutter Medical Group	physician	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00	
Full Name (Last, First, Middle Initial) Phillip S Kennedy MD	•	Date of Receipt
Mailing Address 3614 J Dewey Gray Cir		M = M / D = D / Y = Y = Y
Ste D	State Zip Code	04 23 2013
City Augusta	State Zip Code GA 30909-6512	Transaction ID : C2316725
		Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer	Occupation	
Center for Primary Care and Family Pra	Physician	
Receipt For: Primary General	Aggregate Year-to-Date ▼	
Other (specify) ▼	250.00	
Full Name (Last, First, Middle Initial) Harry Clifton Knight MD	'	Date of Receipt
Mailing Address 10310 Middlebrook Ct		04 20 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Mc Cordsville	State Zip Code IN 46055-9616	Transaction ID : C2315391 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer	Occupation	
Community Health Network	Chief Medical Officer	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General	00 0	
Other (specify) ▼	500.00	

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for each category of the 12 Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Academy of Family Physicians Political Action Committee Full Name (Last, First, Middle Initial) Kimberly T Krohn MD Date of Receipt Mailing Address 2501 Brookside Dr 04 2013 26 City Zip Code State Transaction ID: C2317681 ND 58701-6822 Minot Amount of Each Receipt this Period FEC ID number of contributing 400.00 federal political committee. Name of Employer Occupation UND Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 400.00 Other (specify) Full Name (Last, First, Middle Initial) B. Bruce M LeClair MD Date of Receipt Mailing Address 5088 Windmill Lake Dr 04 29 2013 City State Zip Code Transaction ID: C2317843 GA **Evans** 30809-6612 Amount of Each Receipt this Period FEC ID number of contributing 500.00 federal political committee. Name of Employer Occupation Medicl College of Georgia Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) c. John S Meigs MD Date of Receipt Mailing Address PO Box 289 03 04 2013 100 Serendipity Dr City State Zip Code Transaction ID: C2296412 ΑL **Brent** 35034-0289 Amount of Each Receipt this Period FEC ID number of contributing 25.00 С federal political committee. Name of Employer Occupation Self Employed Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 350.00 Other (specify) 925.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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NAME OF COMMITTEE (In Full) American Academy of Family Physicians Political Action Committee Full Name (Last, First, Middle Initial) John S Meigs MD Date of Receipt Mailing Address PO Box 289 100 Serendipity Dr 04 2013 City State Zip Code Transaction ID: C2317834 ΑL 35034-0289 **Brent** Amount of Each Receipt this Period FEC ID number of contributing 100.00 federal political committee. Name of Employer Occupation Physician Self Employed Receipt For: Aggregate Year-to-Date ▼ Primary General 350.00 Other (specify) Full Name (Last, First, Middle Initial) B. Anne M Montgomery MD Date of Receipt Mailing Address 1708 S Martin St 04 2013 24 City State Zip Code Transaction ID: C2316755 WA 99203-3751 Spokane Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Name of Employer Occupation self physician Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) Full Name (Last, First, Middle Initial) c. Dale C Moquist MD Date of Receipt Mailing Address 4318 Lake Walk Ct 80 2013 04 City State Zip Code Transaction ID: C2298241 TX Missouri City 77459-3268 Amount of Each Receipt this Period FEC ID number of contributing C 90.91 federal political committee. Name of Employer Occupation Family Physician Memorial Family Medicine Residency Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 272.73 440.91 SUBTOTAL of Receipts This Page (optional).....

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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Academy of Family Physicians Political Action Committee Full Name (Last, First, Middle Initial) Delbert D Morris MD Date of Receipt Mailing Address PO Box 3271 04 29 2013 City State Zip Code Transaction ID: C2321138 95353-3271 CA Modesto Amount of Each Receipt this Period FEC ID number of contributing C 500.00 federal political committee. Name of Employer Occupation Physician Scenic Family Medical Group Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) B. Carrie E Nelson MD Date of Receipt Mailing Address 520 W Indiana St 04 2013 11 City State Zip Code Transaction ID: C2300873 Wheaton IL 60187-2325 Amount of Each Receipt this Period FEC ID number of contributing 365.00 federal political committee. Name of Employer Occupation Advocate Health Care Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 365.00 Other (specify)

Full Name (Last, First, Middle Initial) Javette C Orgain MD		Date of Receipt
Mailing Address PO Box 806527	State Zip Code	04 10 2013 Transaction ID : C2301022
Chicago	IL 60680-4126	Amount of Each Receipt this Period
FEC ID number of contributing ederal political committee.	C	125.00
Name of Employer	Occupation	
UNIVERSITY OF ILLINOIS COLLEGE OF MED	PHYSICIAN	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General		

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or for commercial purposes, other than using the	he name and address of any political committee	
NAME OF COMMITTEE (In Full) American Academy of Family	Physicians Political Action Commi	ttee
Full Name (Last, First, Middle Initial) Roanne Michele Osborne-Gaskin M	D	Date of Receipt
Mailing Address 13 Fox Ridge Cres		04 24 2013
City	State Zip Code RI 02886-1705	Transaction ID : C2316754
Warwick	RI 02886-1705	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer	Occupation	
Neighborhood Health Plan of RI	Associate Medical Director	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	500.00	
Full Name (Last, First, Middle Initial) Angelo N Patsalis MD	'	Date of Receipt
Mailing Address 36237 6 Mile Rd		M M / D D / Y Y Y Y Y
City	State Zip Code	04 30 2013 Transaction ID : C2322158
Livonia	MI 48152-2747	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	370.00
Name of Employer	Occupation	1
Henry Ford Health System	Senior Staff Physician	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	370.00	
Full Name (Last, First, Middle Initial) C. Karla Graue Pratt		Date of Receipt
Mailing Address 1239 120th Ave NE Executive Vice Pres - WA A	FP	04 19 2013
City	State Zip Code	Transaction ID : C2315379
Bellevue	WA 98005-2133	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	365.00
Name of Employer	Occupation	
Washington Academy of Family Physician	Executive Director	
Receipt For: Primary General	Aggregate Year-to-Date ▼	
Other (specify) ▼	365.00	
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Academy of Family Physicians Political Action Committee Full Name (Last, First, Middle Initial) Bernard Richard MD Date of Receipt Mailing Address 1926 Declaration Dr 04 29 2013 City State Zip Code Transaction ID: C2320169 IN Greenfield 46140-2762 Amount of Each Receipt this Period FEC ID number of contributing C 1000.00 federal political committee. Name of Employer Occupation Community Physicians Network Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) Full Name (Last, First, Middle Initial) B. Elisabeth L Righter MD Date of Receipt Mailing Address 267 Park Dr 04 10 2013 City State Zip Code Transaction ID: C2301021 OH 45410-1315 Dayton Amount of Each Receipt this Period FEC ID number of contributing 100.00 federal political committee. Name of Employer Occupation Wright State University BSM Physician Receipt For:

Full Name (Last, First, Middle Initial) Sarah L Sams MD		Date of Receipt
Mailing Address 2994 Frazell Rd		04 30 2013
City	State Zip Code	Transaction ID : C2322159
Hilliard	OH 43026-9785	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	122.00
Name of Employer	Occupation	
Ohio Health	Physician	
Receipt For: Primary General	Aggregate Year-to-Date ▼	

400.00

222.00

Aggregate Year-to-Date ▼

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NAME OF COMMITTEE (In Full)	y Physicians Political Action Committee	
Full Name (Last, First, Middle Initial) Gregory Larson Sawin MD Mailing Address 636 Fulton St City Medford FEC ID number of contributing federal political committee. Name of Employer Self Employed Receipt For: Primary Other (specify)	State Zip Code MA 02155-1033 C Occupation Physician Aggregate Year-to-Date ▼	Date of Receipt M M M O2 2013 Transaction ID: C2296353 Amount of Each Receipt this Period 500.00
Full Name (Last, First, Middle Initial) Lisa Gail Soldat MD Mailing Address 6940 NW Beaver Dr		Date of Receipt
City Johnston FEC ID number of contributing federal political committee. Name of Employer	State Zip Code IA 50131-1246 C Occupation	Transaction ID : C2320096 Amount of Each Receipt this Period 365.00
Broadlawns Medical Center Receipt For: Primary General Other (specify) ▼	Physician Aggregate Year-to-Date ▼ 365.00	
Full Name (Last, First, Middle Initial) Glen R Stream MD Mailing Address 1708 S Martin St City Spokane FEC ID number of contributing federal political committee.	State Zip Code WA 99203-3751	Date of Receipt 04 19 2013 Transaction ID : C2314964 Amount of Each Receipt this Period 250.00
Name of Employer Rockwood Clinic Receipt For: Primary General Other (specify) ▼	Occupation physician Aggregate Year-to-Date ▼ 500.00	
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federal political committee.

Name of Employer

BRGP-Livingston

Receipt For:

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365.00

or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Academy of Family Physicians Political Action Committee Full Name (Last, First, Middle Initial) James A Taylor Jr Date of Receipt Mailing Address PO BOX 609 04 08 2013 City State Zip Code Transaction ID : C2298939 70754-0609 Livingston LA Amount of Each Receipt this Period FEC ID number of contributing

Occupation

Physician

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions

Aggregate Year-to-Date ▼ Primary General 365.00 Other (specify) Full Name (Last, First, Middle Initial) B. Lloyd P Van Winkle MD Date of Receipt Mailing Address PO BOX 960 04 2013 10 City State Zip Code Transaction ID: C2300612 TX 78009-0960 Castroville Amount of Each Receipt this Period FEC ID number of contributing 36.50 federal political committee. Name of Employer Occupation Self Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 511.00 Other (specify)

Full Name (Last, First, Middle Initial) c. Duane W Wages MD Date of Receipt Mailing Address 1194 Maxfli Dr 03 2013 04 City Zip Code State Transaction ID: C2296409 OH Akron 44312-5928 Amount of Each Receipt this Period FEC ID number of contributing 370.00 С federal political committee. Name of Employer Occupation Physician Pioneer Physicians, Inc. Receipt For: Aggregate Year-to-Date ▼ Primary General 370.00 Other (specify)

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or for commercial purposes, other than using th	e name and address of any political committee to	solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Academy of Family F	Physicians Political Action Committ	tee
Full Name (Last, First, Middle Initial) Richard Andre Wherry MD		Date of Receipt
Mailing Address 59 Tipton Dr		04 05 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Dahlonega	State Zip Code GA 30533-1603	Transaction ID : C2298062 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Chestatee Regional Hospital Receipt For: Primary General Other (specify) ▼	Occupation Physician Aggregate Year-to-Date ▼ 750.00	
Full Name (Last, First, Middle Initial) W Michael Michael Woods MD Mailing Address 393270 W 2900 Rd	State Zin Code	Date of Receipt 04 13 2013
City Ochelata FEC ID number of contributing federal political committee.	State Zip Code OK 74051-9703	Transaction ID: C2305576 Amount of Each Receipt this Period 365.00
Name of Employer University of Oklahoma Receipt For: □ Primary □ General □ Other (specify) ▼	Occupation Program Director Aggregate Year-to-Date ▼ 365.00	
Full Name (Last, First, Middle Initial) Mailing Address City	State Zip Code	Date of Receipt
FEC ID number of contributing federal political committee. Name of Employer	C Occupation	Amount of Each Receipt this Period
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\setminus	NAME OF COMMITTEE (In Full)														
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		State	Zip Code				Tr	ansa	ction	n ID	: D1	44971			
	Phoenix Purpose of Disbursement	AZ	85072-3852												
	Bank card processing fee						Am	ount	of Ea	ach I	Dist	ourseme	ent this	Peri	od
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		Primary Other (spec	General												
	State: District:	Other (spec	City) \												
_	Full Name (Last, First, Middle Initial)														
В.	American Express						Dat	e of	Disb						
	Mailing Address PO Box 53852						М	04	/	12	- 1	/ Y	2013	Y	
	City S	State AZ	Zip Code 85072-3852				Tr	ansa	ctio	n ID	: D1	145476			
	Purpose of Disbursement Bank card processing fee			Г	-	\neg	Ame	ount	of Ea	ach I	Dist	ourseme	ent this	Peri	od
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	000				Type			-	- 7	_		7		4.22	
	Office Sought: House Disbursen Senate	nent For: Primary	General												
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C.	American Express						Dat	e of	Disb		_				
	Mailing Address PO Box 53852)4	/	15		/ Y	2013	Y	
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C.	American Express							_	sburse					
	Mailing Address PO Box 53852						04		2	_		2013	Y	
		State AZ	Zip Code 85072-3852				Trar	sact	ion ID	: D'	145480			
	Purpose of Disbursement	AZ.	05072-3052		_	_								
	Bank card processing fee						Amou	nt of	Each	Disł	ourseme	ent this	Perio	od
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Detailed Summary Page 27 28 28 28 28 29 30b Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions of or commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (in Full) American Academy of Family Physicians Political Action Committee Full Name (Last, First, Middle Initial) A. American Express Mailing Address PO Box 53852 City State 20 006 Phoenix AZ 85072-3852 Purpose of Disbursement Bank card processing fee Candidate Name Office Sought: House Disbursement For: Senate President Senate Senate President Senate Senate President Senate	ITEMIZED DISBURSEMENTS		(check only	-	
Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Academy of Family Physicians Political Action Committee Full Name (Last, First, Middle Initial) A. American Express Mailing Address PD 8x 53852 City State Zip Code Phoenix AZ 86072-3862 Purpose of Disbursement Bank card processing fee Candidate Name Category/ Type State: District Full Name (Last, First, Middle Initial) B. American Express Mailing Address PD 8x 53862 City Searate Primary General Disbursement Bank card processing fee Candidate Name Category/ Type District Full Name (Last, First, Middle Initial) B. American Express Mailing Address PD 8x 53862 City State Zip Code Primary General Primary General Primary General Primary General Disbursement This Period Category/ Type Transaction ID: D145482 Amount of Each Disbursement this Period Category/ Type Transaction ID: D145492 Amount of Each Disbursement this Period Category/ Type Transaction ID: D145497 Amount of Each Disbursement this Period Category/ Type Transaction ID: D144970 Amount of Each Disbursement D1: D144970 Amount of Each Disbursement this Period Category/ Type Citica Sought: House Search Primary General Primary General D1: D144970 Amount of Each Disbursement this Period Category/ Type District D1: D144970 Amount of Each Disbursement this Period Category/ Type District D1: D144970 Amount of Each Disbursement This Period Category/ Type D1: D145482 Transaction ID: D144970 Amount of Each Disbursement This Period Category/ Type D1: D145482 Transaction ID: D144970 Amount of Each Disbursement This Period Category/ Type D1: D145482 D144 S1 S1 S1 S1 S1 S1 S1 S1 S1 S					
or for commercial purposes, other than using the name and address of any political committee. NAME OF COMMITTEE (in Full) American Academy of Family Physicians Political Action Committee Full Name (Last, First, Middle Initial) A. American Express Mailing Address PO Box 53852 City State Zip Code Phoenix AZ 85072-3852 Furpose of Disbursement Bank card processing fee Ganddate Name Callegory/ Type Disbursement For: State: District: Full Name (Last, First, Middle Initial) B. American Express Mailing Address PO Box 53852 City State Zip Code Phoenix AZ 85072-3852 Furpose of Disbursement For: State: District: Full Name (Last, First, Middle Initial) B. American Express Mailing Address PO Box 53852 City State Zip Code Phoenix AZ 85072-3852 Furpose of Disbursement Earth Category/ Type Office Sought: House Districts Full Name (Last, First, Middle Initial) Candidate Name Candidate Name Candidate Name Category/ Type Office Sought: House Senate Primary General Districts Full Name (Last, First, Middle Initial) C. Bank Of American Merchant Services Mailing Address WA2-505-01-40 PO Box 2485 City State Zip Code PO Box 2486 City					
American Academy of Family Physicians Political Action Committee Full Name (Last, First, Middle Initial) A. American Express Mailing Address PO Box 53852 City State Zip Code Phoenix AZ 85072-3852 Purpose of Disbursement Bank card processing fee Candidate Name Category' 26.54 Transaction ID : D145481 Amount of Each Disbursement this Period Candidate Name Category' 26.54 Transaction ID : D145481 Amount of Each Disbursement this Period Category' 26.54 Transaction ID : D145481 Amount of Each Disbursement ID : D145482 Amount of Each Disbursement ID : D145482 Amount of Each Disbursement Ibis Period Candidate Name Category' Type Category' Type Date of Disbursement Ibis Period Category' Type Transaction ID : D14570 Transaction ID : D144970 Transaction ID : D144970 Amount of Each Disbursement Ibis Period Category' Type Transaction ID : D144970 Amount of Each Disbursement Ibis Period Category' Type Category' Type Transaction ID : D144970 Amount of Each Disbursement Ibis Period Category' Type Transaction ID : D144970 Transaction ID : D144970 Amount of Each Disbursement Ibis Period Category' Type Transaction ID : D144970 Transaction ID : D144970 Amount of Each Disbursement Ibis Period Category' Type Transaction ID : D144970 Transaction I					
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Α.	BOEHNER FOR SPEAKER						Disburse			
	Mailing Address 320 1st St SE					04	1		2013	Y
	City	State	Zip Code			Trans	action ID	· D145425		
	Washington	DC	20003-1838			irans	action ID	: D145135		
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В.	Democratic Senatorial Campaign C	Committe	ee				Disburse			
	Mailing Address 120 Maryland Ave NE					04	2	6 Y	2013	Y
	City S Washington	State DC	Zip Code 20002-5610			Trans	action ID	: D145358		
	Purpose of Disbursement Campaign contribution				\exists	Amount	of Each	Disbursem	ent this	Period
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	Office Sought: House Disbursen									
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C.	National Republican Senatorial Co	mmittee				Date of	Disburse	ment		
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	Mailing Address 425 2nd St NE					04	1	7	2013	
	City	State	Zip Code			T======	antier ID	. D4 45450		
	Washington	DC	20002-4914			ırans	action ID	: D145153		
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American Academy of Family Phys	icians Political Action	n Committe	ee	
Full Name (Last, First, Middle Initial)				
A. DAVE CAMP FOR CONGRESS			Date of Disbursement	1
Mailing Address 20 F St NW Ste 500			04 26 2013	
City	State Zip Code		Transaction ID : D145357	
Washington	DC 20001-6703		Transaction ID . D145557	
Purpose of Disbursement Campaign contribution			Amount of Each Disbursement this Per	riod
Candidate Name		Category/	2500.00	
Rep. Dave Camp		Type	2500.00	,
	nent For: 2014 Primary General Other (specify)			
State: MI District: 04				
Full Name (Last, First, Middle Initial)				
B. SCHAKOWSKY FOR CONGRESS	3		Date of Disbursement	
Mailing Address PO Box 5130			04 17 2013	
Evanston	State Zip Code IL 60204-5130		Transaction ID : D145138	
Purpose of Disbursement Campaign contribution			Amount of Each Disbursement this Per	riod
Candidate Name		Category/	4500.0	
Rep. Jan Schakowsky		Type	1500.0	J
	nent For: 2014 Primary General Other (specify)			
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C. HUFFMAN FOR CONGRESS 2014	+		M M / D D / Y Y Y Y	-
Mailing Address P.O. BOX 151563			04 17 2013	
City S	State Zip Code CA 94915		Transaction ID : D145137	
Purpose of Disbursement Campaign contribution	OA 34913			
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Rep. Jared Huffman		Category/ Type	1000.00	0
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American Academy of Family Physics	sicians Political Actio	n Committ	ee
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A. FRIENDS OF ROSA DELAURO			Date of Disbursement
Mailing Address 12 TRUMBULL STREET			04 17 2013
The state of the s			
City	State Zip Code		Transaction ID : D145129
NEW HAVEN	CT 06511		1141134011011115 : 5140120
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Rep. Rosa DeLauro		Category/ Type	2500.00
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Senate	Primary General		
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State: CT District: 03	Convention		
Full Name (Last, First, Middle Initial) B. TIM MURPHY FOR CONGRESS.			Date of Disbursement
B. TIM MURPHY FOR CONGRESS			M M / D D / Y Y Y Y
Mailing Address P.O. BOX 24551			04 17 2013
City	State Zip Code		Transaction ID : D145126
PITTSBURGH Purpose of Disbursement	PA 15234		
Campaign contribution			Amount of Each Disbursement this Period
Candidate Name		Category/	
Rep. Tim Murphy		Type	1000.00
	ment For: 2014		
	Primary General		
President State: PA District: 18	Other (specify) ▼		
Full Name (Last, First, Middle Initial)			
C. BECERRA FOR CONGRESS			Date of Disbursement
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Mailing Address P.O. Box 261060			04 17 2013
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City Los Angeles	State Zip Code CA 90026		Transaction ID : D145128
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Campaign contribution		I II	Amount of Each Disbursement this Period
Candidate Name		Category/	2500.00
Rep. Xavier Becerra		Туре	2500.00
Office Sought: House Disburse Senate	ment For: 2014 Primary General		
President	Other (specify)		
State: CA District: 31	- · · · (-		
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NAME OF COMMITTEE (In Full) American Academy of Family Phys	icians Political Action	on Committ	ee	
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Full Name (Last, First, Middle Initial) A. ALEXANDER FOR SENATE 2014	INC		Date of Disbursement	YY
Mailing Address 228 S WASHINGTON STREET SU	IITE 115		04 17 201	
ALEXANDRIA	State Zip Code VA 22314		Transaction ID : D145127	
Purpose of Disbursement Campaign contribution			Amount of Each Disbursement t	his Period
Candidate Name Sen. Lamar Alexander		Category/ Type	7	1500.00
	nent For: 2014 Primary General Other (specify)			
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